

**STATE OF NEBRASKA**

DEPARTMENT OF HEALTH AND HUMAN SERVICES
REGULATION AND LICENSURE – Environmental Health Services
P.O. Box 95007, Lincoln, Nebraska 68509-5007
402-471-2541

This form may be completed online (<http://www.hhs.state.ne.us/enh/pwsindex.htm>).

Mail completed application with payment for
billing information to the address listed below.

FOR DEPARTMENT USE ONLY

Exam Date: _____ Score: _____
Exam Ver.: _____ Approved: _____
Date: _____

APPLICATION FOR WATER OPERATOR EXAMINATION AND TRAINING COURSES

Applicants for the Operator Training Course Must Complete Sections A, B, D, and E

Applicants for the Examination Only Must Complete Sections A, B, C, and E

Please Type or Print Clearly

SECTION A – PERSONAL INFORMATION

1. Name:	First:	Middle/MI:	Last:
2. Address:	Street/PO/Route:		
	City:	State:	Zip:
3. Telephone:	Home:	Work:	
4. Social Security Number:	<i>Disclosure of your social security number is mandated by the Nebraska Child Support Law. Its usage by the Department, in regard to this application, is to allow the Department to distinguish between persons who have the same or similar names.</i>		
5. What Certification Grade Level Examination Do You Request: <input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> VI			

SECTION B – EDUCATION AND EXPERIENCE (Education and experience for the desired certification grade must meet requirements of Title 179 NAC 10-006)**EDUCATION**

1. High School Diploma: <input type="checkbox"/> Yes <input type="checkbox"/> No		2. Equivalency (GED, etc.):	
3. Colleges or Specialized Schools and Locations (List Separately):	Dates Attended:		Major:
	To:	From:	
			Credits Hours or Degree Obtained:

EXPERIENCE (List relevant experience beginning with current or most recent. Attach additional sheets, as needed.)

1. Name of Employer:		Location:	
If employer is a public water system, in what County is the system located:			
Name of Supervisor:		Supervisor's Phone Number:	
Dates of Employment:	From:	To:	
Describe Duties:			
Were/are you the Certified Operator in Responsible Charge: <input type="checkbox"/> Yes <input type="checkbox"/> No			
2. Name of Employer:		Location:	
If employer is a public water system, in what County is the system located:			
Name of Supervisor:		Supervisor's Phone Number:	
Dates of Employment:	From:	To:	
Describe Duties:			
Were/are you the Certified Operator in Responsible Charge: <input type="checkbox"/> Yes <input type="checkbox"/> No			

3. Name of Employer:		Location:	
If employer is a public water system, in what County is the system located:			
Name of Supervisor:		Supervisor's Phone Number:	
Dates of Employment:	From:	To:	
Describe Duties:			
Were/are you the Certified Operator in Responsible Charge: <input type="checkbox"/> Yes <input type="checkbox"/> No			

SECTION C – If you wish to only take an exam for water operator certification, complete the following. (Education and experience must meet requirements of Title 179 NAC 10-006)

Nebraska Water Operator Certification(s) Held (Current or Expired): <input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V <input type="checkbox"/> VI			
Certification Number(s):		Date(s) of Expiration:	
Grade IV Training Course (Classroom or Correspondence) Completed: <input type="checkbox"/> Yes <input type="checkbox"/> No		Date:	
NOTE: If you are requesting a Grade VI examination, please provide the following information:			
Are you currently certified in another state to test and/or repair backflow prevention devices: <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, what state:		Certification/Registration Number:	
Dates of attendance at a 32 hour Grade VI training course:		Location:	
Who was the provider of the Grade VI training course:			

REGISTRATION FORM FOR EXAMINATION ONLY MUST BE RECEIVED BY THIS OFFICE **A MINIMUM OF TEN WORKING DAYS PRIOR TO THE SCHEDULED EXAM.**

SECTION D – If you wish to register for a water operator training course, complete the following.

Water Operator Training Course to Attend: Grade (check one) <input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV		
Course Location:	City:	Course Dates:

COURSES ARE SUBJECT TO CANCELLATION AND LIMITATION IN SIZE. REGISTRATION FORM FOR TRAINING COURSES MUST BE RECEIVED BY THIS OFFICE **A MINIMUM OF TWO WEEKS PRIOR TO THE FIRST DAY OF THE COURSE.**

SECTION E

MORAL CHARACTER

Have you ever been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has any disciplinary action been taken by the Department against your current or past held water operator certifications?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Attestation by the Applicant: The Department may assess an administrative penalty in the amount of \$10.00 per day for making water system process control or system integrity decisions without being certified.

Have you made process control or system integrity decisions about water quality or quantity that affect public health or a community or non-transient non-community public water system in Nebraska prior to holding a certificate of at least Grade IV?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, what is the actual number of days you made these process control or system integrity decisions prior to being certified as at least a Grade IV water operator?	

CERTIFICATION OF APPLICATION

I hereby certify that the preceding information is true and accurate to the best of my knowledge.

Signature of Applicant

Date

FEES FOR WATER OPERATOR COURSE

Grade 4 Correspondence Course:	\$80.00 <input type="checkbox"/>
Grade 4 Classroom Course (2 days):	\$80.00 <input type="checkbox"/>
Grade 3 Course (5 days):	\$200.00 <input type="checkbox"/>
Grade 1 and 2 Course (5 days):	\$200.00 <input type="checkbox"/>
Books for Courses: If you currently have these books, it is not necessary to purchase more; however, it is strongly recommended that you have the same edition that the course is using.	
Are books necessary:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>For Grade 3 and 4 Courses and Grade 4 Correspondence Course, the required books are:</i>	
California State University, Small System Operation and Maintenance, 4 th Edition (Green Book)	\$45.00 <input type="checkbox"/>
California State University, Distribution System Operation and Maintenance, 4 th Edition (Red Book)	\$45.00 <input type="checkbox"/>
<i>For Grade 1 and 2 Combined Course, the required books are:</i>	
California State University, Water Treatment Plant Operation, Volume 1, 4 th Edition	\$45.00 <input type="checkbox"/>
California State University, Water Treatment Plant Operation, Volume 2, 3 rd Edition	\$45.00 <input type="checkbox"/>
Application Fee (Required to receive water operator certification):	\$94.00 <input type="checkbox"/>
Total Charges	\$ _____
Check Enclosed: <input type="checkbox"/> (Make check payable to NHHS Regulation and Licensure)	
Bill System: <input type="checkbox"/> (If billed, the applicant may experience a delay in processing of his/her water operator certificate)	System Name: _____ Address: _____

FEES FOR EXAMINATION ONLY

Examination Fee:	\$50.00 <input type="checkbox"/>
Application Fee (Required to receive water operator certification):	\$94.00 <input type="checkbox"/>
Total Charges	\$ _____
Check Enclosed: <input type="checkbox"/> (Make check payable to NHHS Regulation and Licensure)	
Bill System: <input type="checkbox"/> (If billed, the applicant may experience a delay in processing of his/her water operator certificate)	System Name: _____ Address: _____